CERTIFICATE OF	TRANSMISSION UNDER 37 C.F.R. 1.8
I hereby certify that this corresponden Trademark Office at facsimile number	tee is being transmitted to the United States Pateut and a 703-872-9306, on the date indicated below.
Name of Person Signing Certificate:	Holly Tyroman
8-16-1004	- Hally W

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applicant: § Confirmation No.: 3128 ş ATTILIO TOMASI, et al. ŝ \$00 KO KO KO KO Filed: October 31, 2003 Art Unit: 1625 Serial No.: 10/698,737 Examiner: Charanjit Aulakh § For: PROCESS FOR PREPARING Docket No.: H053912.0133US0 CRYSTALLINE FORM I OF CABERGOLINE Customer No.: 01200

PETITION AND FEE FOR EXTENSION OF TIME (37 CFR 1.136(a))

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Dear Sir:

The fee of \$110.00 for obtaining a one-month extension of time to August 16, 2004 (August 14, 2004 and August 15, 2004 falling on Saturday and Sunday respectively), for the above-captioned patent application is attached hereto.

The Commissioner is hereby authorized to charge any additional filing fees or credit any overpayment to Deposit Account No. 16-2435. A duplicate copy of the Fee Transmittal sheet is enclosed.

mitted.

Date:

pectfully sul

AKIN GUMP STRAUSS HAUER & FELD LLP

1111 Louisiana Street, 44th Floor Houston, Texas 77002

Telephone:

(713) 220-5800

Facsimile:

(713) 236-0822

PTO/SB/17 (01-03)

		Complete if Known				
FEE TRANSMITTAL	Application Number	10/698,737				
for FY 2004 Patent fees are subject to annual revision	Filing Date	October 31, 2003				
	First Named Inventor	ATTILIO TOMASI				
	Examiner Name	Charanjit Aulakh				
	Group / Art Unit	1625				
Total Amount of Payment \$ 110.00	Attorney Docket No.	H053912.0133US0				

METHOD OF PAYMENT (check one)				47.07		_	
1. X The Commissioner is hereby authorized to charge		FEE CALCULATION (continued) 3. Additional Fees					
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§§ 1.16 & 1.17			2052	\$ 25	filing for or cover sheet	\$	
Applicant claims small entity status.		\$2,520	1812	\$2,520	Request for Recommination Requesting publication of	S	
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